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Please file the application and charge to **Deposit Account No. 08-0750** the amount of \$1,712.00, to cover the filing fee. Triplicate copies of this letter are enclosed. In the event of non-

payment or improper payment of a required fee, the Commissioner is authorized to charge or to credit Deposit Account No. 08-0750 as required to correct the error.

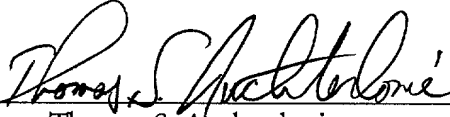
Please address all correspondence to:

HARNESS, DICKY & PIERCE, P.L.C.  
P.O. Box 8910  
Reston, VA 20195

Telephone inquiries may be directed to the undersigned representative at (703) 390-3030.

Respectfully submitted,

HARNESS, DICKY & PIERCE, P.L.C.

By:   
Thomas S. Auchterlonie  
Reg. No. 37,275

TSA:ewd

Attorney for Applicant